Rainbow Children's Hospital

BirthRight by Rainbow

Rainbow Children's Hospital - Banjara Hills

8-2-120/103/1,2,3,4 and 5,Road No: 2, Banjara Hills, Telangana, Hyderabad, INDIA Banjara Hills ,Hyderabad ,Telangana, India ,500034.
TEL NO :+91-40-4466 5555
WEB : https://rainbowhospitals.in

ADMISSION SHEET

Registration Details :

Admission No : IP5-00174541 **Admit Date** : 30-May-2026 **Admit Time** : 03:32 PM **UHID** : BAH-00657671

Patient Details :

Patient Name	: Baby Of MEKALA CHANDRAMALA	**Age**	: 0 D
Guardian	: Mr MEKALA PRAVEEN	**DOB**	: 30-05-2026 01:28 PM
Gender	: Male	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: H NO 5-77, DICHPALLY (V) (M), Dichpalli Nizamabad Telangana INDIA 503175	**Phone No**	: 9441966496/ 9381825124
		E-mail	: NOMAIL@GMAIL.COM

Admission Details :

Bed Type : NICU **Bed No** : NICU 268 **Ward Name** : 2F-NICU 3

Room No : NICU 268 **Admission Type** : First Visit

Contact Details :

Name	: Mr MEKALA PRAVEEN	**Relationship**	: Father
Contact Address	: H NO 5-77, DICHPALLY (V) (M), Dichpalli Nizamabad Telangana INDIA 503175	**Phone No**	: 9441966496 /

M. Praveen

Signature

Doctor Details :

Doctor Name	: Dr. MVB Pratyush	**Specialisation**	: NEONATAL INTENSIVE CARE
Referral Doctor	: Self	**Phone No**	:
Co-Consultant	:		

Payment Details :

Payment Mode	: Cash	**Deposit Amount**	: 0.00
		Payor Name	: SELFPAY

SELF INDENT

ACTIVITY

AH-00657671 IP5-00174541
aby Of MEKALA CHANDRAMALA
-05-2026 0Y0M0D4H (M)
. MVB Pratyush

Name : ______________________

UHID No. : ______________ Consultant: ____________ Dept : __________

Date of Admission: _________ Time : _________ Date of Discharge : _________ Time: _________

Room / Bed No : __________ Ward : __________ Suggested Billable bed type : ______________

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
2/6/26	9:40pm	NICU	3rd floor	[signature]

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1	Dr. venkataRam thylapalli	2/6/26	9639970	[signature]
2				
3				
4				
5				
6				
7				
8				
9				
10				

Docu. No. RCHBH/FRM/GENERAL/145

INVESTIGATIONS

Date	Investigations	Order No.	Signature
30/5/26	Bloo group, Blood c/s	26055054	[illegible]
30/5/26	VBG RBS	26055053	[illegible]
30/5/26	CXR	R2 65-027364	[illegible]
31/5/26	RBS	26055149	[illegible]
31/5/26	NPI	26055320	[illegible]
30/5/26	GRBS	26055319	[illegible]
1/6/26	RBS		[illegible]
2/6/26	SBR	26056161	[illegible]
3/6	AABR	9640657	Latha

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
30/5/26	Inv. monitor	4:30 Pm	10 Pm	9634895	[illegible]
30/5/26	CPAP		31/5/26 8Am		
	Oxygen		31/6/26		
	Syring pump		10pm		
31/5/26	SSPT	8Am	1/6/26	9636566	[illegible]
	oxygen	4.30pm	31/6/26	9634895	[illegible]
	syring pump				
	Iv. monitor		10 Pm		
2/6/26	Inv. monitor	30/5/26	10 Pm	9634895	[illegible]
3/6	DSPT	9Am		9642237	Latha

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
30/5/20	Iv placement	(1)	9635249	[illegible]

ANY OTHER INFORMATION

....

....

....

....

....

....

Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

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Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M2D (M)
Dr. MVB Pratyush

NEWBORN MONITORING FORM

Date of Birth	:	New Born Screening	:
Time of Birth	:	TFT	:
Mode of Delivery	:	OAE	:
Birth Weight	:	Mother's Blood Group	:
Head Circumference	: 33 Cm	Baby's Blood Group	:
Length	: 41 Cm	Anomaly Scan	:
Red Reflex	:	Vaccination	:

Date	Weight	Type of Feed	Quantity	Temperature	Signature
2/6/26	wd wt 1.768kgs	EBM	20ml	98.1°F	[signature]
3/6/26	1.760kgs	EBM	20ml	97.9°F	[signature]
4/6	1.759kg	EBM	26ml	98.0°F	[signature]

Date	Time	Investigation	Result	Order No.	Signature

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush

NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Mrs. Mekala Chandramala Age : 26y Father's Name : .... Age : ....

Date of Birth : .... Date of Admission : .... UHID No.: ....

NICU Consultant : Dr. A. Reddy Referring Consultant : ....

Transferring Unit : ☐ OT ☐ Labour Room ☐ ER ☐ Ward

Transported ? ☐ Yes ☐ No - If yes : ☐ Long (> 30 kms) ☐ Short (< 30 kms)

BIRTH INFORMATION

Name : B/O Mekala Chandramala Mother's Blood Group : O +ve

Gender : ☑M ☐F Blood Group : O +ve Birth Weight (gms) : 1.979 Length (cms) : ....

Date of Birth : 30/5/26 Time of Birth : 1:28 pm OFC (cms) : ....

Place of Birth : RCH Banjara Estimated Gesth Age : 34 weeks, 2/2 on 28+6

Current Obstetric History : (Booked) / Unbooked Case)

Maternal Age : 26y Ht : .... Wt : .... BMI: .... Married Life : .... LMP : 14/9/25 EDD : 16/7/26

Conception : Spontaneous or with Rx. : prim ICSI, I.V.F.

Booked at what GA. : 26+6 weeks AN Steroids Drugs / Doses : Betnosol given @ 31+5 in VO PPROM.

Last Scans Details : ~~35+6~~ 32+6, AFI – 13.2, Breech

DOPPLER – (N) (Twin₂ IUFD @26+6 weeks. TT Immunization and Iron / Folic Acid : ....

MATERNAL RISK FACTORS

Age : ☐ <18 yrs ☐ > 35yrs 26y

Consanguinity : ☐ Yes ☑ No

If yes, degree of consanguinity : ☐1 ☐2 ☐3

H/o PIH (after 20 weeks) / PE

How many Drugs / Doses / Since how long : X

H/o value of recent BP recording, proteinuria, edema, oliguria, any investigations (LFT, platelet count) : X

IUGR - when detected : ....

Doppler (Increased Resistence / ADEF / REDF / Redistrbution in MCA) / Ductus Venosus : (N)

AFI : 13.2

H/o GDM/ pre GDM/ on diet or insulin

Controlled or not, recent values, HbA1 values : (NO)

Compliance with Rx : ....

Scans : LGA, TIFFA , Fetal Echo : ....

H/o Hypothyriodism : when diagnosed ? Medication? NO

Any other Chronic Medical Problems, when detected drugs ? Cervical circlage insitu

(Anemia, SLE, Jaundice, CHD, Heart Disease)

Infection : H/O, Fever K/C/O - UL clubfoot.

(☐Malaria ☐ UTI ☐TORCH ☐TB ☐HIV ☐HBV)

UTI : when : .... Any culture : ....

PPROM: Duration : .... ☐ Uterine Tenderness ☐ Foul Smelling Liquor ☐ HVS (if taken) - Results : ....

Medication during Pregnancy : PPROM → since 31+6 weeks + IUD Duration : ....

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Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

PAST OBSTETRIC HISTORY

.... P : .... A : .... L : ....

Sl. No.	Age	GA wks	B.W	Gender	Significant	Details
				Primi I-VT		

PERINATAL HISTORY

Treating Obstetrician : Dr. Shruthi Reddy Hospital : RCM Banjara ☑ Inborn ☐ Outborn

Duration of Labour Elective LSC

First stage (> 18 hours sig) Breech

Second stage (> 2 hours after dilation) IUD - twin - II

LSCS : ☐ Elective ☐ Emergency Indication : PPROM

Specify the reason : ....

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☐ Normal ☐ Suspicious ☐ Pathological

MSL : ....

Resuscitaion : ☐ Yes ☑ No

Cord ABG : ....

Placenta : (weight, surface, No. of cotyledons, calcifications, malformations, clots etc : ....

NEONATAL RESCUSTITION DETAILS

APGAR SCORE

Gestational Age : .... Weeks : ....

SIGN	0	1	2
COLOUR	Blue or Pale	Acrocyanotic	Completely Pink
HEART RATE	Absent	< 100 Minutes	> Minutes
REFLEX IRRITABILITY	No Response	Grimace	Cry or Active Withdrawal
MUSCLE TONE	Limp	Some Flexion	Active Motion
RESPIRATION	Absent	Weak Cry; Hypoventilation	Good, Crying

1 Minute	5 Minutes	10 Minutes
1	1	
2	2	
2	2	
2	2	
2	2	
9/10	9/10	
TOTAL		

Resuscitation			
Minutes	1	5	10
Oxygen			
PPV / NCPAP			
ETT			
Chest Compressions			
Epinephrine			

Snapee II Score

					Score
Mean BP (mmHg)	> 30 (0)	20-29 (9)	< 20 (19)		
Lowest Temp (oF)	> 96 (0)	96-95 (8)	< 95 (15)		
Pao2 / Fio2 (mmHg%)	> 2.49 (0)	1-2.49 (5)	0.3-0.99 (15)	< 0.3 (28)	
Lowest Serum PH	> = 7.2 (0)	7.1-7.19 (7)	< 7.1 (16)		
Multiple Seizures	No (0)	Yes (19)			
U. Output (ml / kg / hr)	> = 1 (0)	0. 1-0.9 (5)	<0.1 (18)		
Apgar Score	> = 7 (0)	< 7 (18)			
Brith Weight	> = 1kg (0)	750 - 999 (10)	< 750 (17)		
SGA	> 3rd percentile (0)	< 3rd (12)			
				Total	

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :

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Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

History of

- Baby delivered by LSCS → CIAB → DCC done @ 60 sec,
- received undurwarmer
→ airway → cleared → Baby had RD Tachypnea + SCR+
→ Delivery room CPAP started @ 5cm
↓
Shifted to NICU

Investigation details in previous Hospital :

—

Feeding History :

—

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Baby Of MEKALA CHANDRAMALA
10-05-2026 0 Y 0 M 2 D (M)
Dr. MVB Pratyush

Patient

Past History :

Family History :

Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Disposition : Alert, active

VITALS : Temperature : 36.4 HR : 150 RR : 70 NIBP : .... CFT : <3sec

Color of the extremities : acrocyanosis — pink

Jaundice : .... Pallor : .... SpO2 : 98% in R/A preductal

ANTHROPOMETRY: Birth Weight : 1.97 Length : .... HC : .... Present Weight : ....

Ponderal Index : .... AGA : .... SGA : .... LGA : ....

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Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush

HEAD TO TOE EXAMINATION

HEAD :	Fontanelles : Sutures Shape / Moulding : Edema / Bruising : Size - (H.C.) :	(N)
FACIES : (Any Facial Dysmorphism)		NO
NECK and CLAVICLES :	Range of Motion : Asymmetry : Masses :	(N) ~~Needs to be checked~~
EYES :	Symmetry : Red Reflex : Discharge :	→ (N) Needs to be checked
EARS, NOSE MOUTH and THROAT :	Ear set / Shape : Periauricular Pits / Tags : Nasal shape / Patency : Palate : Gums : Lips : Tongue :	(N) No cleft
THORAX and BREASTS :	Shape of Thorax : Position of Nipples and Number :	(N)
ABDOMEN and UMBILICUS :	Shape : Organomegaly : Bowel Sounds : Umbilical Stump : Discharge :	(N) 2A 1V
GENITILIA :	Labia / Hymen : Testicles/penis : Anus :	B/L testis +
HERNIAL ORIFICES		free
TRUNK and SPINE :		(N)
SKIN LESIONS :		NO
EXTREMETIES :	Fingers / Toes : Deformities : Hip Joint Examination :	(N)
	Arms / Legs : Mobility :	(N)

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Baby Of MEKALA CHANDRAMALA
10-05-2026 0 Y 0 M 2 D (M)
Dr. MVB Pratyush

SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM:

Breathing Pattern : ☐ Regular ☐ Periodic ☐ Shallow ☐ Gasping SAS - 1

Mention If baby has Respiratory distress: RR: .... SCR / ICR / See - Saw breating : ....

Scoring of respiratory distress if present (Silverman or Downe's) : ....

Mention if baby is on : ☐ Hood box ☐ CPAP ☐ Ventilator 2RCPAP - 5

Settings : ....

SpO_2: .... Auscultation: B/L EAN Breath Sounds: NVS Added Sounds: No occasional grunt

CARDIOVASCULAR SYSTEM :

HR : 140 BP : -

Femoral Pulses : good

Other Peripheral Pulses : good

Precordial Activity : (N)

Murmurs : (N)

Signs of Cardiac Failure : (N)

ABDOMEN:

Shape : (N)

Palpation : (N)

Palpable masses : ....

Abdominal girth : ....

Hernia orifice : free

Anal Patency : patent

Umbilical Cord : 2A 1V

First urine passed : Not

Meconium passed : Not

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) : alert active

State of wakefulness : alert active

Prechtle Score : ....

Nerves : ....

....

MOTOR SYSTEM:

Passive Tone : good Jaw

Active Tone : good

Neonatal Reflexes : ....

Grasp : ☑ Palmar ☑ Plantar ☑ Sucking ☐ Rooting ☐ Crossed adductor : ....

Moro's : (+) nt B/L DTR : (N)

ATNR : .... Skull and Spine : (N)

Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush

Congenital Anomalies : NO gross cong. anomaly

Diagnosis : Late PT / AGA / Twin — I (Twin-2 IUFD) / RD (TTNB) / Breech

FOOT PRINTS

Left Side :

Right Side :

Resident Doctor :

Signature : Dr. Sowmaya

Name : Rupijali

Date & Time : 30/5/26 2:00pm

Consultant :

Signature Dr. MVB PRATHYUSH Registration No: TSMC/FMR/30369

Name : Prath

Date & Time : 30/5/26

PLEASE FILL UP THE FOLLOWING DETAILS

1. Name of the referring Doctor : ....
2. Name of the referring Hospital : ....

   Address : ....

   Contact Numbers : ....
3. Contact Details of the referring Doctor : ....

   Mobile No. : .... E-mail ID : ....
4. Name of the Doctor in Rainbow Team : ....

   .... on whose name the patient is being referred.

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Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush

AT THE TIME OF TRANSFER TO THE WARD

Final Diagnosis :

Neonatal condition at the time of Transfer:

Vital : HR : RR : BP : SPO2 : Weight :

Any Oxygen requirement :

Systemic :

Plan

Case seen by Dr. Sowmaya

→ CPAP - SOS.

Medications :

→ TV - 60cc/kg/day - 10ml - EBM - 2hourly, give EBM as much possible

→ - Blood c/s, - Gas → Inj Piptaz to start

Plan during ward follow up : → Cord - blood for grouping.

→ NPI @ 24 hours.

→ GRBS - 6th hourly.

Feeding Plan at the time of shifting :

↓

Baby has tachypnea - 70/min
SCR (+)
nasal flare (+)
No grunt
No hypoxia in R/A

↓

Start CPAP c RAM's cannula

LUS

noted 8 am

Screenings done during NICU Stay :

NSG :

Hearing Screen :

ROP :

TFT :

NP2 :

Doctor Signature (Handover Given):

Doctor Signature (Handover Taken):

Doctor Name:

Doctor Name:

Date & Time:

Date & Time:

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Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/5/26 3:00pm		Seen by Dr. Pratyush
		- Trace HNS (maternal)
		- ~~Trace~~ Maternal CRP
	LUS Score = (4)	
		- Wean CPAP to 5cm
		- Trial of weaning CPAP if no RD by night
		- put deoderm over nasal septum
		- GRBS - 6th hourly
		- NPO @ 24 hours of life (1 pm t/m)
		- CXR - now.
		- If no RD, by morning wean off CPAP
		- Continue full feed
		noted by [illegible] 013421 30/5/26 @3pm.

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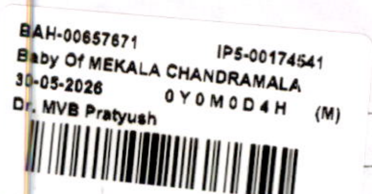
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/5/26 5:30PM		c/o/w Dr. pratyush plan: - TV - 60ml/kg/day 30ml/kg feeds ↓ 5ml 2nd hrly [EBM/DBM] 30ml/kg fluids ↓ 10% Dextrose + 3ml/kg calcium gluconate Aneesh noted by [illegible] 30/5/26 @5:30PM
31/5/26 1am	Night round On CPAP PEEP-5.5 No Desat / Brady / Apnea. SpO_2 - 94% HR - 148/min RR - 35/min BP - 53/31 (39). Stool - passed P/A - no distension soft	seen by Dr. [illegible] → Continue CPAP 5.5-15 ← TFI - 60 ml/kg/day [40ml/kg - feeds 20ml/kg - IV fluid - 10% Dextrose + 3ml/kg calcium gluconate → GRBS - 6th hourly. ← Review - [illegible] CBG. [illegible] doses reduced / Review HFN / Location (Dr. N. Peatrisha) noted by [illegible] 31/5/26 @1:30AM

Docu. No. : RCHBH /FRM / CLINICAL / 088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Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 4 H (M)
Dr. MVB Pratyush

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : .... Day of Life : 16HOL .... PMA: 34

Term ☐ Preterm ☑ Gestation : 34 .... Corrected Gestational Age: ....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Late preterm (34 weeks)	
2.	LBW (1.983 kg)	
3.	RD → CPAP	
4.	Twin-I (Twin-2 - IUFD)	
5.	Suspected sepsis.	
6.	Apnea of prematurity	

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : ....

Mode of Ventilation : HFNC ☐ CPAP ☑ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.......... PEEP 5 .... VG.......... Rate.......... FiO_2.......... Oxygen : .... L/min

Last CXR : .... SpO_2..................

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: ....

Change over the Last 24 Hours..................
(1) Brady (↓80) | No Desaturation, No Apnea.
(1) Bradycardia (↓~17) + Requiring Stimulation.

CARDIO VASCULAR SYSTEM

Plan of Care :

Continue CPAP

CNS

Neurological Examination : ....

.... Sedation —

Last Neurosonogram : .... Any Seizures —

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:.................... Head Circumference:....................

Input : .... / (+/-) .... Output : .... ml/k/d Urine Output :........ ml/kg/hr Stools : passed

IV Fluids - Type of IVF : .... @ .... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:.................... Frequency:....................

TPN : ☐ Yes ☐ No - If yes, details : .... Calories:....................

Abdominal Examination:....................

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : ....

Sepsis screen:....................

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :....................

Antibiotic Sl.No.	Drugs	Days	
1.	Inj - Piptaz D_2		Inj - Caffeine .
2.			
3.			

Plan of Treatment :

1. Continue CPAP PEEP - 5, FiO2 - 25% - wean as tolerated.
2. TV - 60 → Review 70 ml/kg/day
   - 40 ml/kg - feeds
   - 20 ml/kg - fluids.
3. GRBS - 6th hourly
4. Review - CBG Or SOS
5. Monitor vitals
6. I/O charting 6th hourly
7. W/f Abdominal distension, Bradycardia, Desaturation.

Doctor's Name (Handover given) : Dr. Pratibha

Signature : [signature]

Date & Time: 31/5/26 .

Doctor's Name (Handover taken) : [signature]

Signature : [signature]

Date & Time: 31/5/26

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Baby Of MEKALA CHANDRAMALA
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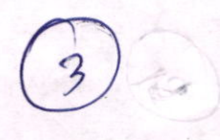
Dr. MVB Pratyush



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/5 @ 7:19AM		seen by Dr pratyush sir
		↓ CPAP 4
		wean CPAP to low flow
		do gas - now
		TV - 80ml/kg/day
		↑ 2ml ~~alternate~~ 2 hourly till full feed
		NPI @ 24 HOC
		1:28pm
		noted by Jaya 3/5 @ 7:30Am
3/5/26 8am		

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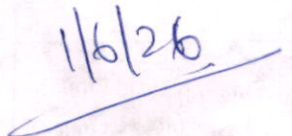
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/5/26		
9:30am		
		Plans
	- weaned off to room air	
		- continue SSPT c̄ eyes & genitalia covered.
	SpO2 - 96%. PR - 160/min RR - 60/min;	
		- prone nursing
		- TV = 80ml/kg/day ↓ 13ml 2nd hrly full OG feeds.
		- w/f apnoea, brady.
		- Trace Blood c/s
		- RBS 8th hourly. Arun
		noted by Sr. 31/5 @ 10pm

IAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
0-05-2026 0Y0M0D4H (M)
Dr. MVB Pratyush



DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : .... Day of Life : 4DHOL. PMA: 34+1 wks

Term ☐ Preterm ☐ Gestation : 34wks Corrected Gestational Age: ....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Late preterm / LBW.	
2.	RD → CPAP → lowflow → RA	
3.	Twin 1	
4.	Suspected sepsis	
5.	Apnea of prematurity.	
6.		

Today's Weight : 1942g(↓23g)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : ....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP........ PEEP........ VG........ Rate........ FiO_2........ Oxygen : .... L/min

Last CXR : .... SpO_2 ....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: ....

Change over the Last 24 Hours on RA. ∴ last night
no brady / desat
Under SSPT @ 1/v/o. SBR - 5.8 (cutoff 6.5)
@ 24HOC

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 127/min.
RR - 40/min.
SpO2 - 92%.
BP - 53/44(47)

RBS - 101mg/dl.

CNS

Neurological Examination : ....

.... Sedation —

Last Neurosonogram : — .... Any Seizures —

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:........ Head Circumference:........

Input : .... / (+/-) .... Output : .... ml/k/d Urine Output : 2.2 .... ml/kg/hr Stools : passed.

IV Fluids - Type of IVF : .... @ .... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:........ Frequency:........

TPN : ☐ Yes ☐ No - If yes, details : .... Calories:........

Abdominal Examination:........

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : ....

Sepsis screen:........

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :........

Antibiotic Sl.No.	Drugs	Days	
1.	Inj-PIPTAZ	D3	Inj-Caffeine.
2.			
3.			

Plan of Treatment :

- Continue SSPT c̄ eyes & genitals covered.
- TV - 80 ml/kg/day ⇒ 13ml/2nd hrly, full OG feed. R/v paladay.
- Trace blood culture. R/v antibiotics.
- w/f apnea, brady.
- RBS - 8th hrly.

Doctor's Name (Handover given) : Dr Poojitha

Signature : [signature]

Date & Time: 1/6/26 9am

Doctor's Name (Handover taken) : Amrit

Signature : [signature]

Date & Time: ....

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26 11:30am		Seen by Dr. Pratyush
		→ Try paladay feeds
		→ Trace 48h culture & stop antibiotics
		→ Stop SSPT.
		→ Shiftout tomorrow.
		→ Crib care.
		→ RBS - OD.
		→ Stop Caffeine tomorrow.
	poopthe	→ Remove IV line after stopping antibiotic.
	Noted by Aiswarya 01/6/26 @ 11:55AM	

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D4H (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26 3:30pm	Afternoon Round	
	on RA Hemodynamically stable. Accepting paladay feed in 20 mins	Plan
	Vitals HR – 123/min. SpO2 – 98%. RR – 49/min	→ Crib care. → IV – 100cc/kg/day 16ml/2nd hrly, full palady feed
	P/A – soft	→ Remove IV line, Stop antibiotics
	Blood culture no growth at 48h.	→ RBS – OD
		→ Stop Caffeine tomorrow
		→ Monitor vitals
	Poojitha	
	noted by Aiswarya 1/6/26 @ 3-30pm	

BAH-00657671 IPS-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D4H (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

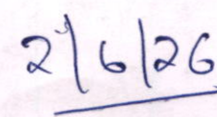
Date & Time	Progress Notes	Doctor's Order
1/6/26 4pm		Seen by Dr. Pratyush.
		→ Ortho opinion tomorrow
		I/v/o club feet.
		→ Crib care.
		→ Remove IV line
		→ Temp. monitoring 4th hly
	noted by Aishwarya 1/6/26 @ 4pm	Dr.
1/6/26 9:20pm		Seen by Dr. Nilesh
		→ Trace maternal HVS culture & urine.
		→ Ortho opinion tomorrow -
	noted by [illegible] 1/6 @ 10pm	Dr. Nilesh

3AH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
10-05-2026 0 Y 0 M 2 D (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA (M)
10-05-2026 0 Y 0 M 2 D
Dr. MVB Pratyush



2/6/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: D3 Day of Life: 66 HOL PMA: 34 W + 3 D

Term ☐ Preterm ☐ Gestation: 34 wks Corrected Gestational Age: .... Today's Weight: 1.911 (↓ 129)

	Problems		
	S.No.	**Current**	**Past Problems**
Overview	1.	late preterm (34 wk),	
	2.	Low birth weight (<2500g (1.979 kg))	
	3.	Twin - I	
	4.	Suspected Sepsis	
	5.	Apnea of prematurity	
	6.		
Clinical Assessment		- On room air HR - 140/min SPO2 - 96% RR. P/A - soft.	- accepting - paladai feeds well. - No episodes of vomiting - TV - 80 cc/kg/day - 16 ml/2nd hrly (EBM + DBM) - urine output - 2.4 cc/kg/hr - passed stool - (7 times)	
Medications Used		- Inj caffeine citrate	(maternal high vaginal swab 48 hrs - No growth) Blood c/s - 48 hrs - No growth overall RBS - 90 mg/dl	

Plan of Care: → TV - 100 cc/kg/day - 16 ml - 2nd hrly - paladai feeds.
- ortho opinion 1/v/10 - club foot
- crib care.
- GRBS - OD
- Temp monitoring 4th hrly

Doctor's Name (Hand over given): Pavani V
Signature: Pavani
Date & Time: 2/6/26

Doctor's Name (Hand over taken): Dr. Aeesha
Signature: Dr. Aeesha
Date & Time: 2/6/26

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
10-05-2026 0Y0M2D (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/26 10:22am	Positional CTEV → To review after 1 month	Seen by Dr Pratyush Ortho opinion today Dr Venkatakam Train parents in feeding Send SBR, NBS T/m Shift to room if parents are confident. TV - 120cc/kg/day full paladay
	[signature]	
02/06/26 1:30pm	Afternoon rounds Baby hemodynamically stable on air. Cry/tone/activity - normal Tolerating palladai feeds taking ~20ml/2hrly O/E - HR - 142/m RR - 38/m SPO_2 - 98% in RA	Plan 1) Continue full palladai feeds involve parents in feeding 2) Plan to shift out if parents are confident 3) Continue TV - 120 cc/kg/day 20ml 2hrly to continue 4) W/F apnea, bradycardia, distension, vomiting, others 5) Send SBR, NBS T/m 7) R/V after 1 month c ortho

Positional CTEV (ortho opinion)

3AH-00657571 IP5-00174541
Baby Of MEKALA CHANDRAMALA
10-05-2026 0 Y 0 M 2 D (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
02/06/26 3pm		Seen by Dr. Pratyush
		1) Train the patient attenders in palladai feeding → if confident → shift out
		2) R/v in ortho after 1 month.
		3) SBR, NBS T/M
		Noted by kavya 2/6/26 @ 8pm
		Dr. Nsh
	Staffing notes	
2/6/26 8:00pm		Plan:-
	- Stable on room air	- TV - 120ml/kg/day ↓ 20ml 2nd hrly full paladai feeds f/b burping;
		- send SBR, NBS } T/M mng at 6:00Am.
		- Temperature monitoring 4th hourly.

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
10-05-2026 0 Y 0 M 2 D (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		- Inform if Temperature < 97.5°F.
		- I/O charting 6th hourly.
		- R/V c̄ ortho consultation after 1 month.
		Noted by kavya 2/8/26 @ 8pm [signature]

Docu. No. : RCHBH /FRM / CLINICAL / 088

AH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
10-05-2026 0 Y 0 M 2 D (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/6/26 8.10am	Morning round	
	~~D0~~ 90HOL.	
	on RA	
	Hemodynamically stable.	Plan.
	Accepting paladay feeds.	→ TV – 140cc/kg/day
	T.wt – 1760g (+8g).	22ml/2nd hrly
		full paladay feed.
	passed urine & stools	→ Start DSPT c̄
	SBR – 14.5	eyes & genitals covered.
	(cutoff 14.1)	
		→ Trace NBS.
		→ Temp. monitoring 4th hrly, inform if < 97.5°F.
		→ R/v vaccination.
		✓ AABR.
		→ Ortho follow up after 1month.
	Dr. Poojitha	→ ROP ~~on~~ after DOL 21
		→ Monitor intake
		Noted by Lata @8am

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
10-05-2026 0 Y 0 M 2 D (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/6/26		clean ty
		TM: 18 cm
		26.2 cm
		Use blue tag
		- AABR today
		- vaccination today
		temp
		Noted by @10AM

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 4 D (M)
Dr. MVB Pratyush

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/6 9.20 am	O/O (circled; struck through) NBS - (N) Maternal HVS - sterile	d/s [illegible] (struck through) To do AABR vaccination (struck through) D/S (circled) TV — 28 - 20 ml To do SBR (10 am) [signature] Dr. MVB PRATHYUSH Registration No: TSMC/FMR/30969 vaccination - BCG - OPV - HepB [signature]

Docu. No. : RCHBH /FRM / CLINICAL / 088

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D8H (M)
Dr. MVB Pratyush

CROSS CONSULTATION FORM

Doctor Name : Dr Venkat Ram Pratyush Date : 2/6/26 Time : 12:50pm

Diagnosis : Preterm c̄ ? B/L CTEV

Hospital : Rainbow Children's Hospital

	Type of Referral :
Referred for : ☐ Opinion ☐ Co-Management ☐ Transfer of care	☐ Emergency ☐ Urgent ☐ Non Urgent

Reason for Referral : If for concurrent care specify the particular need, especially in the absence of a second diagnosis:

Signature:

Findings and Recommendations :

Thanks for ref

Dr Pratyush

[illegible]

Consultant :

Name : Dr Venkat Ram Pratyush Signature : [illegible] Date & Time : 2/6/2026 1:[illegible]

Doc. No. : RCH / FRM / CLINICAL / 049

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

RESULT SHEET

Date	30/5/26	31/5/26				
Time	11pm	1.49pm				
Hb		17.				
PCV		51.0				
RBC		5.20				
WBC		10.44				
N/L		53.1/36.9				
Platelets		228				
CRP		5				
ESR						
PCT						
RBS						
Na	137	142				
K	5.2	4.1				
Cl	108	110				
Ca/Mg		9.9				
Phosphate						
Urea		11				
Creatinine		1.0				
ALP						
SGPT						
SGOT						
T.Bill/Conj		5.8 < 0.1 / 5.7				
T.Protein						
S.Albumin						
S.Globulin						
A/G Ratio						
Uric Acid						
S.Amylase						
Sr.Lipase						
Blood Lactate						
S.Cholesterol						
PT/INR						
APTT						
CSF Protein / Sugar						
Cells						
N/L						

Date						
Time						
CUE - Alb						
CUE - Sugar						
CUE - Ketones						
CUE - PUS Cells						
CUE - RBC Cells						
CUE						
Stool Pus Cell						
OVA / Cyst						
Occult Blood						

Culture and Sensitivities : Blood c/s - 48 h - No growth (verbal)

Radiology :

USG :

X-Ray :

ECHO :

CT :

MRI

Others (ECG, Contrast Studies etc.,) :

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush

RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
30/5/26.	3pm	82 mg/dl	10% + carn	[signature]
30/5/26	9pm	109 mg/dL	10% + carn Dex	[signature]
31/5/26	5Am	97 mg/dL	10% Dex	[signature]
31/5/26	1.30pm	91 mg/dl	10% Dex	[signature]
1/6/26	5Am	101 mg/dL	full feed	[signature]
~~2/6/26~~	~~6Am~~			
2/6/26	6Am	90 mg/dL	full feed	[signature]
3/6/26	6am	105 mg/dl	full feed	dk

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush

DRUG CHART

Date of Admission: .... Drug Allergies: .... ☐ Not known any Drug Allergies

FOR THE SAFETY OF THE PATIENT

GENERAL - Ensure that all patient details are entered above. ONLY A DOCTOR SHALL WRITE MEDICATION ORDERS.

DOCTOR - Please use only approved abbreviations (refer to Hospital's approved list of abbreviations).
- Use approved pharmaceutical names, BLOCK LETTERS, metric dosage. English instructions.
- Any changes in drug therapy must be ordered by a NEW PRESCRIPTION. Do not alter existing instructions.
- Discontinue a drug by drawing a line / through it and a similar line through subsequent recording panels.
- The date and time of stopping the drug along with the doctors name and sign must be mentioned.
- Only one chart should be in use at any one time. When the chart is full, a new supplement can be kept within this drug sheet folder.

NURSES - Nurses must follow strictly the FIVE RIGHTS before administration of medication.
1) Right Patient 2) Right Drug 3) Right Dosage 4) Right Route 5) Right Time
- AVOID TAKING VERBAL ORDERS. NO VERBAL ORDERS FOR HIGH RISK/HIGH ALERT MEDICINES (EXCEPT FIRST DOSE OF EPINEPHRINE DURING CPR). Follow Hospitals's Verbal Order Policy.

SOS / PRN (As Required Medication)

DRUG :				Date ▸ / Time ▾														
Dose	Route	Frequency	Start Date															
Doctor's Signature		Valid Period	Pharm.															
Additional Instructions:																		

DRUG :				Date ▸ / Time ▾														
Dose	Route	Frequency	Start Date															
Doctor's Signature		Valid Period	Pharm.															
Additional Instructions:																		

DRUG :				Date ▸ / Time ▾														
Dose	Route	Frequency	Start Date															
Doctor's Signature		Valid Period	Pharm.															
Additional Instructions:																		

VERIFIED BY : Name .... Signature

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

REGULAR PRESCRIPTIONS

Weight. 1.983 Ward. ....

DRUG: Inj. PIPERACILIN / TAZOBACTAM				Date / Time	30/5
Dose	Route	Frequency	Start Date		
190mg	IV	12th hourly	30/5/26		
Name & Signature of the Doctor Starting the Drugs: Dr. Anusha				6PM	
Additional Instructions: 100mg/kg/dose				6AM	
Daily Doctor's Endorsement by a Sign					

DRUG: Inj. PIPERACILLIN TAZOBACTAM				Date / Time	30/5	31/5	1/6
Dose	Route	Frequency	Start Date				
200mg	IV	12H	30/5				
Name & Signature of the Doctor Starting the Drugs: N. Pratyush				6AM			
Additional Instructions: 100 mg/kg/dose				6PM			
Daily Doctor's Endorsement by a Sign							

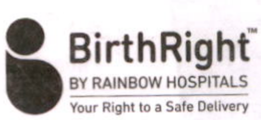
Stop
Pavan (2/6/26)

DRUG: Inj. CAFFIENE CITRATE				Date / Time	31/5	1/6
Dose	Route	Frequency	Start Date			
100mg	IV	OD	31/5			
Name & Signature of the Doctor Starting the Drugs: N. Pratyush				6PM		
Additional Instructions: 5mg/kg/day						
Daily Doctor's Endorsement by a Sign						

STOP
Pavan
2/6/26

DRUG:				Date / Time
Dose	Route	Frequency	Start Date	
Name & Signature of the Doctor Starting the Drugs:				
Additional Instructions:				
Daily Doctor's Endorsement by a Sign				

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush



Sheet No: .... **REGULAR PRESCRIPTIONS** Weight .... Ward ....

DRUG :

Dose	Route	Frequency	Start Dt.

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date ▸ Time ▾

DRUG :

Dose	Route	Frequency	Start Dt.

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date ▸ Time ▾

DRUG :

Dose	Route	Frequency	Start Dt.

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date ▸ Time ▾

DRUG :

Dose	Route	Frequency	Start Dt.

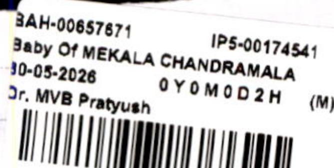
Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date ▸ Time ▾

VERIFIED BY : Name .... Signature ....



Sheet No: ....

REGULAR PRESCRIPTIONS

Weight .... Ward ....

DRUG :

Dose	Route	Frequency	Start Dt.

Date ▸ / Time ▾

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

DRUG :

Dose	Route	Frequency	Start Dt.

Date ▸ / Time ▾

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

DRUG :

Dose	Route	Frequency	Start Dt.

Date ▸ / Time ▾

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

DRUG :

Dose	Route	Frequency	Start Dt.

Date ▸ / Time ▾

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

VERIFIED BY : Name .... Signature ....

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

Weight. .... Ward. ....

	Date / Time		Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.
DRUG :		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route / Start Date		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

VARIABLE DOSE	Date / Time		Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.
DRUG :		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route / Start Date		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:		Dose		Dose		Dose		Dose	
		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

VERIFIED BY : Name .... Signature ....

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
31/05/26	4 am.	inj. Caffeine citrate	20 mg/kg loading dose	IV	N. Pm	mousomi / Sanya.

SAH-00657671 IPS-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0 Y 0 M 0 D 2 H (M)
Dr. MVB Pratyush

I.V. FLUIDS CHART

Weight. 1.983 kg Ward. ....

Date	Time	Name of I.V. Fluid (If infusion, mention ml./hr = Mcg/kg/min. etc)	Route	Flow Rate ml/hr	Doctor Sign	Nurse Sign	Date of Stopping	Doctor Sign	Nurse Sign
30/05/26	3:30pm	TV - 60 cc/kg/day 10% D	IV	5 ml/hr	[illegible]	[illegible] / [illegible]	31/5	[illegible]	[illegible] / [illegible]

VERIFIED BY : Name : .... Signature ....

BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D8H (M)
Dr. MVB Pratyush

31/8/26

Doc. No. : RCH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: .... Time:	8 am	10 am	12 pm	2 pm	4 pm	6 pm	8 Pm	10 Pm	12 Am	2 Am	4 Am	6 Am
Temperature (F)	36.5°C	36.5°C	36.6°C	36.6°C	36.6°C	36.6°C	36.4°C	36.5°C	36.4°C	36.4°C	36.5°C	36.4°C

Doctor/Nurse/Family Concern?

Heart Rate (bpm) and Blood Pressure (mmHg) * (scale 190–50)

Note: BP does not score in early warning scoring

Resp. Rate (bpm) over 1 Minute * (scale 70–10)

Readings in the order written (11 entries):

Reading	1	2	3	4	5	6	7	8	9	10	11
Blood Pressure	↕	↕	53/39 (42)	50/31 (41)	54/35 (42)	68/35 (45)	54/28 (37)	53/42 (45)	63/35 (35?)	53/31 (39)	56/37 (44)
Heart Rate (Number)	160	129	130	127	123?	124	131	128	122	152	137
Resp Rate (Number)	32	40	39	55	38	39	39	34	30	37	46
Resp Distress (Mod/ Severe / None / Mild)	N	N	N	N	N	N	N	N	N	N	N
Receiving O_2 (l/min)											
O_2 Saturations (%)	96%	95%	97%	96%	97%	97%	93%	94%	94%	93%	93%
Conscious Level (Normal / Altered)	N	N	N	N	N	N	N	N	N	N	N
GCS *	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	1	1	1	1	1	1
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

ACTIONS

NB: Scores 3 should be recorded overleaf

Score	Action
Score 1	Continue normal observation by staff nurse
Score 2	Shift in charge nurse to be informed and continue hourly observations
Score 3	Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
Score 4	Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
Score 5 & 6	Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min., then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
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Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

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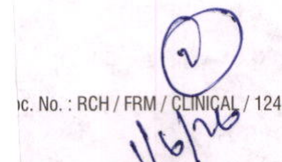
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

7671 IP5-00174541
EKALA CHANDRAMALA
0Y0M0D4H (M)
ratyush

Doc. No. : RCH / FRM / CLINICAL / 124



1/6/26

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: .... Time:	8 am	10 am	12 pm	2 pm	4 pm	6 pm	8 pm	10 pm	12 am	2 am	4 am	6 am
Doctor/Nurse/Family Concern?												
Temperature (F) (104–94)	36.5°C	36.5°C	36.8°C	98.1°F	98.5°F	98.5°F		98.6°F		98.3°F		98.7°F
Heart Rate (bpm) and Blood Pressure (mmHg) * (190–50)	159/38 (90)	157/38 (124)	↕	Crib care				Crib care				
Heart Rate (Number)	128	129	129	130	126	131	145	114	131	141	142	145
Resp. Rate (bpm) (Over 1 Minute) * (70–10)									Crib care			
Resp Rate (Number)	42	51										
Resp Distress — Mod/ Severe												
Resp Distress — None / Mild												
Receiving O_2 (l/min)												
O_2 Saturations (%)	96%	94%	100%	98%	99%	100%	99%	98%	100%	99%	100%	99%
Conscious Level — Normal	N	N	N	N	N	N	N	N	N	N	N	N
Conscious Level — Altered												
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0	1	1	1	1	1	1
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Note: BP does not score in early warning scoring

ACTIONS

NB: Scores 3 should be recorded overleaf

Score		Action
Score 1	:	Continue normal observation by staff nurse
Score 2	:	Shift in charge nurse to be informed and continue hourly observations
Score 3	:	Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
Score 4	:	Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
Score 5 & 6	:	Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
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- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
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Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

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- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

7671 IP5-00174541
IEKALA CHANDRAMALA
6 0Y0M0D4H (M)
Pratyush

2/6/26

No. : RCH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: .... Time:	8 Am	10 Am	12 Pm	2 Pm	4 Pm	6 Pm	10 pm	2 am	6 am
Doctor/Nurse/Family Concern?									
Temperature (F) (104–94)	98.8f	98.9f	98.6f	98.6f	98.7c	98.9c	98.1f	97.9f	98.2f
Heart Rate (bpm) and Blood Pressure (mmHg) * (190–50)	Crib		care		Cribcare		*	*	*
Heart Rate (Number)	127	120	132	170	160	171	139b/m	128b/m	126b/m
Resp. Rate (bpm) (Over 1 Minute) * (70–10)							*	*	*
Resp Rate (Number)							38b/m	32b/m	34b/m
Resp Distress — Mod/ Severe									
Resp Distress — None / Mild							N	N	N
Receiving O_2(l/min)									
O_2Saturations (%)	96%	99%	100%	98%	96%	98%	98%	99%	100%
Conscious Level — Normal	N	N	N	N	N	N	N	N	N
Conscious Level — Altered									
GCS *	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Heart Rate note: BP does not score in early warning scoring

ACTIONS		
NB: Scores 3 should be recorded overleaf	Score 1	: Continue normal observation by staff nurse
	Score 2	: Shift in charge nurse to be informed and continue hourly observations
	Score 3	: Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
	Score 4	: Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
	Score 5 & 6	: Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
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Record Details when EARLY WARNING SCORE >3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

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B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given 02/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

IP5-00174541
BAH-00657671
Baby Of MEKALA CHANDRAMALA (M)
10-05-2026 0 Y 0 M 2 D
Dr. MVB Pratyush

Doc. No. : RCHBH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

3/6/26

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: .... Time:	10am	2pm	6PM	10Pm	11pm	12Am	1:30 Am	2Pm
Doctor/Nurse/Family Concern?								
Temperature (F) (scale 94–104)	98.1F	97.8F	97.9F	98.0F	97.3F	98.0F	97.0F	98.0F
Heart Rate (bpm) and Blood Pressure (mmHg) * (scale 50–190)	* (~135)	* (~135)	* (~140)					
Heart Rate (Number)	133b/m	138b/m	143b/m	138b/m		140b/m		
Resp. Rate (bpm) Over 1 Minute) * (scale 10–70)	* (~35)	* (~38)						
Resp Rate (Number)	36b/m	40b/m	38b/m	36b/m		28b/m		
Resp Distress — Mod/ Severe								
Resp Distress — None / Mild	N	N	N	N		N		
Receiving O_2(l/min)								
O_2Saturations (%)	99%	100%	97%	98%		98%		
Conscious Level — Normal	N	N	N	N		N		
Conscious Level — Altered								
GCS *	15/15	15/15	15/15	15/15		15/15		
TOTAL SCORE Number of shaded boxes	0	0	0	01		01		
Pain Score	0	0	0	[illegible]		[illegible]		
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]		[illegible]		

Note: BP does not score in early warning scoring

ACTIONS

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Patient Sticker

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BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M4D (M)
Dr. MVB Pratyush

4/8/26.

Doc. No. : RCHBH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

EARLY WARNING SCORE: CHILDREN'S UNIT

	3Am	4Am	6Am
Date / Time	3Am	4Am	6Am
Doctor/Nurse/Family Concern?			
Temperature (°F) (scale 94–104)	97.6F	97.2F	98.0F
Heart Rate (bpm) and Blood Pressure (mmHg) * (scale 50–190)			* (~148)
Heart Rate (Number)			148b/m
Resp. Rate (bpm) over 1 Minute) * (scale 10–70)			* (~40)
Resp Rate (Number)			40b/m
Resp Distress: Mod/ Severe / None / Mild			N
Receiving O_2(l/min)			
O_2Saturations (%)			98%
Conscious Level: Normal / Altered			N
GCS *			15/15
TOTAL SCORE Number of shaded boxes			01
Pain Score			2
Observer's Initials			C

Note: BP does not score in early warning scoring

ACTIONS		
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	Score 2	: Shift in charge nurse to be informed and continue hourly observations
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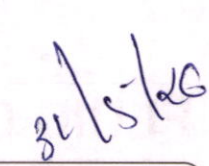
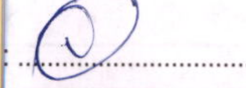
BAH-00657671 IP5-00174541
Baby Of MEKALA CHANDRAMALA
30-05-2026 0Y0M0D2H (M)
Dr. MVB Pratyush



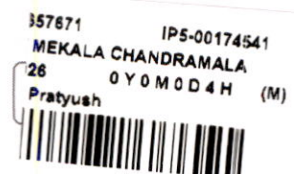
FLUID CHART

Sheet No. :  ....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – NG	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am										|	
	09:00 am	DBm			9ml		passed			9ml		AW
	10:00 am										0	
	11:00 am	DBm			9ml		—			10ml	|	
	12:00 pm											
	01:00 pm	DBm			9ml		passed			8ml	|	
Total Intake :						Total Output :						
	02:00 pm											
	03:00 pm	DBm			9ml		passed			11ml	|	
	04:00 pm										0	
	05:00 pm	DBm			↑12ml		—			13ml		Ø
	06:00 pm										|	
	07:00 pm	DBm			12ml		passed			10ml		
Total Intake :						Total Output :						
	08:00 pm											
	09:00 pm	DBm			12ml		passed			9ml	|	
	10:00 pm											
	11:00 pm	DBm			↑13ml		not passed			10ml	0	Ø
	12:00 am										|	
	01:00 am	DBm			13ml		—			—		
Total Intake :						Total Output :						
	02:00 am											
	03:00 am	DBm			13ml		passed			11ml	|	
	04:00 am											
	05:00 am	DBm			13ml		passed			13ml	0	Ø
	06:00 am											
	07:00 am	DBm			13ml		—			—	|	
Total Intake : 137ml						Total Output : 104ml						

Total 24 hrs. Intake	72cc/kg/day.	Total 24 hrs. Output	2.2cc/kg/hr



Sheet No. : 2 1/6/26

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake				Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
		Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine		
			Mouth	I.V	O.G							
	08:00 am											
	09:00 am	DBM			13ml		Passed			12ml	0	
	10:00 am											
	11:00 am	DBM			13ml		—			10ml		
	12:00 pm											
	01:00 pm	DBM	13ml (15min)				passed			13ml		
Total Intake :						Total Output :						
	02:00 pm											
	03:00 pm	DBM	13ml (15min)				—			10ml		
	04:00 pm											
	05:00 pm	DBM	13ml (10min)				passed			12ml	0	
	06:00 pm											
	07:00 pm	DBM	13ml (12min)				passed			10ml		
Total Intake :						Total Output :						
	08:00 pm											
	09:00 pm	DBM	13ml				passed			12ml		
	10:00 pm											
	11:00 pm	DBM	13ml				—			—	NA	
	12:00 am											
	01:00 am	EBM	13ml				passed			9ml		
Total Intake :						Total Output :						
	02:00 am											
	03:00 am	DBM	13ml				not passed			11ml		
	04:00 am										NA	
	05:00 am	DBM	16ml				passed			12ml		
	06:00 am											
	07:00 am	DBM	16ml				—			—		
Total Intake : 156ml						Total Output : 111ml						

Total 24 hrs. Intake	82cc/kg/day

Total 24 hrs. Output	2.4cc/kg/hr

Docu. No. : RCHBH/FRM/CLINICAL/092

57671 IP5-00174541
MEKALA CHANDRAMALA
26 0Y0M0D4H (M)
Pratyush

FLUID CHART

TV – 100cc kg/day
TF – 16ml
Bwt – 1.911 ↓81 gms

Sheet No. : 3 2/6/26

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake: Nature of Fluid	Route: Mouth	Route: I.V	Route: N.G	Output: NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am											
	09:00 am	DBm	16ml	15min			Passed			13ml		
	10:00 am											
	11:00 am	DBm	16ml	10min			Passed			10ml		
	12:00 pm											
	01:00 pm	EBm	20ml	"			—			8ml		
Total Intake :						Total Output :						
	02:00 pm											
	03:00 pm	EBm	20ml	13min			—			10ml		
	04:00 pm											
	05:00 pm	EBm	20ml	18min			Passed			7ml		
	06:00 pm											
	07:00 pm	EBm	20ml	20min						11ml		
Total Intake :						Total Output :						
	08:00 pm											
	09:00 pm	EBM	20ml				✓			✓	NO IV	
	10:00 pm											
	11:00 pm	EBM	20ml				✓			✓		
	12:00 am											
	01:00 am	EBM	20ml				✓					
Total Intake : Taken						Total Output : M – 3				U – 2		
	02:00 am											
	03:00 am	EBM	20ml							✓	NO IV	
	04:00 am											
	05:00 am	EBM	20ml				NP					
	06:00 am									✓		
	07:00 am	EBM	10ml									
Total Intake : Taken						Total Output : M – 0				U – 2		

Total 24 hrs. Intake	Taken

Total 24 hrs. Output	M – 6 U – 10

57671 IP5-00174541
MEKALA CHANDRAMALA
26 0Y0M0D4H (M)
Pratyush

FLUID CHART

Sheet No. : 4

3/6/26

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake: Nature of Fluid	Route: Mouth	Route: I.V	Route: N.G	Output: NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am									✓		Latha
	09:00 am	EBM	26ml				✓					
	10:00 am										NO	
	11:00 am	EBM	26ml								IV	Latha
	12:00 pm						✓			✓		
	01:00 pm	EBM	26ml									Latha
Total Intake :						Total Output :				U-2	M-2	
	02:00 pm									✓		
	03:00 pm	EBM	26ml									Latha
	04:00 pm						✓				NO	
	05:00 pm	EBM	26ml								IV	Latha
	06:00 pm						✓			✓		
	07:00 pm	EBM	26ml									Latha
Total Intake :						Total Output :				U-2	M-2	
	08:00 pm											
	09:00 pm	EBM	26ml				✓			✓		
	10:00 pm											Supriya
	11:00 pm	EBM	26ml				✓			✓		
	12:00 am											
	01:00 am	EBM	26ml							✓		
Total Intake :						Total Output :				U-3	M-2	
	02:00 am									✓		
	03:00 am	EBM	26ml				✓					Supriya
	04:00 am									✓		
	05:00 am	EBM	26ml									
	06:00 am									✓		
	07:00 am	EBM	26ml									
Total Intake :						Total Output :				U-3	M-1	

Total 24 hrs. Intake	Taken

Total 24 hrs. Output	U-10 M-7

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